

Examination Parts

☐ Fundamentals

☐ Principles _Practice and Discipline

Code _____

see candidate guide for list of codes

Examination Schedule

☐ Spring
☐ Fall
 Year _____

Indicate Your Site Preference

<input type="checkbox"/>	Milwaukee
<input type="checkbox"/>	Madison
<input type="checkbox"/>	Platteville

Modification needed, special arrangements for ADA

☐ Yes
☐ No

Fees Included

- ☐ Cashier's Check
- ☐ Money Order
- ☐ Visa or Mastercard

Have you ever taken the Engineer exam in Wisconsin or any other state?

☐ Yes
☐ No

First Name											MI	Last Name																
Street Address																												
City														State		Zip Code												
																					-							
Daytime Phone Number								Social Security Number								Date of Birth												
				-				-									-			-								

School Code

10	Marquette University
20	Milwaukee School of Eng
30	UW - Madison
40	UW - Milwaukee
50	UW - Platteville
60	Other Wisconsin Schools
70	Out-of-State School
80	No School

Degree

<input type="checkbox"/>	Associate's	<input type="checkbox"/>	No Degree
<input type="checkbox"/>	Bachelor's		
<input type="checkbox"/>	Master's	Graduation Date	
<input type="checkbox"/>	Doctorate	<input type="text"/>	<input type="text"/>
		Mo.	Year

School (if code 60 or 70)

school name: _____
city: _____

How do you describe yourself?

(optional)

☐ White, not of Hispanic origin

☐ Black, not of Hispanic origin ☐ MALE

☐ Hispanic

☐ American Indian or Alaskan ☐ FEMALE

☐ Asian or Pacific Islander

☐ Other

☐ I prefer not to respond

Email Address

Candidate Certification and Waiver

I state that I am the person referred to on this form and that the answers set forth are strictly true in each respect. I understand that false or forged statements made in connection with this form may be grounds for revocation of my credential or other disciplinary action. I agree that if for any reason my examination papers or results are unavailable, an examination is not held, or my form is denied, any claim I may have shall be limited to the amount of the examination fee. I also understand that if I am issued a credential, failure to comply with the laws or rules of either the Engineering Section or the Department of Regulation and Licensing will be cause for disciplinary action.

I also agree that site selection cannot be guaranteed and that I will be admitted only to the site for which I have been assigned by CPS.

_____/_____/_____
Signature of Candidate Date

Eligibility

Fundamentals: As specified in A-E 4.08(2), I am applying for the Wisconsin Fundamentals of Engineering examination based on my belief that I qualify by (check one): ☐ Not a graduate student in a D.C.

- ☐ Not less than senior standing in a B.S. program
- ☐ 4 years of engineering experience
- ☐ 4 years combined education and experience

Principles and Practice: As specified in A-E 4.08(2), I am applying for the Wisconsin Principles and Practices of Engineering examination based on my belief that I qualify by (check one):

☐ Degree + 4 years experience

☐ 8 years qualifying experience

☐ 8 years combined education and experience

MAIL FORM WITH FEE TO: CPS - ATTN: WI-A786
241 LATHROP WAY
SACRAMENTO, CA 95815